

Docket No.: 42390.P11010

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/020,143 Confirmation No. 6618  
Inventor : Alduino et al.  
Assignee : Intel Corporation  
Filed : Dec. 13, 2001  
Art Unit : 3663  
Examiner : Moskowitz, Nelson  
Title : Optical Amplifier with Transverse Pump

PRELIMINARY AMENDMENT

MS RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Reconsideration and further examination of the application is hereby requested.  
Kindly consider the following:

CERTIFICATE OF TRANSMISSION

I hereby certify that I am causing the above referenced correspondence to be facsimile transmitted to the US Patent and Trademark Office on the date shown below:

April 23, 2004  
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Krista A. Mathieson

Name of Person Filing Correspondence

Krista Mathieson  
Signature

April 23, 2004  
Date

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Appl. No.: 10/020,143

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/020,143
		Filing Date	December 13, 2001
		First Named Inventor	Alduino
		Art Unit	3363
		Examiner Name	Nelson Moskowitz
Total Number of Pages in This Submission	14	Attorney Docket Number	42390P11010

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SE/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Recognition Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">         First Class Certificate of Mailing, the stamped return postcard and the RCE Transmittal       </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kenneth J. Cool, Reg. No. 40,570 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>KJ Cool</i>
Date	April 23, 2004

CERTIFICATE OF MAILING/TRANSMISSION		
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.		
Typed or printed name	Krista Mathieson	
Signature	<i>Krista Mathieson</i>	Date April 23, 2004

Based on PTO/88/21 (02-04) as modified by Blakely, Sokoloff, Taylor & Zafman (M) 02/10/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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**INTRODUCTORY COMMENTS**

**Request for an Extension of Time**

In the event any extension of time fee is required, or any other fee related to this Response is required, please consider this a request therefore. Authorization is hereby given to charge Deposit Account No. 50-0221 for such fee or fees.

**Authorization to Charge Deposit Account**

Authorization is hereby given to charge Deposit Account No. 50-0221 for any fee or fees related to this Preliminary Amendment.

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